



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 6

| | |
|----------------------|-----------------------|
| Application Number | 09/758,709 |
| Filing Date | 1/11/2001 |
| First Named Inventor | James Edward Landrith |
| Art Unit | 2817 |
| Examiner Name | Arnold M. Kinkead |
| Attorney Docket No. | ITDE-PAV105US |

ENCLOSURES (Check all that apply)

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| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee transmittal (in dup); copy of Revocation of Power of Attorney as filed on 1/13/2004 |
|--|---|---|

Remarks:**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

| | | | |
|--------------------|-------------------|-----------------------------------|--------|
| Firm or Individual | Robert P. Seitter | Registration No. (Attorney/Agent) | 24,856 |
| Signature | | | |
| Date | 1/26/2004 | | |

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| Name (Print/Type) | Robert P. Seitter |
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